

## Recent Changes Will Increase Health Costs and Decrease Coverage in South Dakota

Without Congressional action, eligible enrollees in South Dakota will pay on average **\$1,284** more per year for marketplace health coverage—and multiple times more per family. These costs could be even higher, given [preliminary projected increases](#) in premiums for 2026 of **15 percent**.

**53,000** residents had health insurance marketplace coverage in 2024, **69** percent more than in 2021. This includes:

- ~**13,050** residents ages 55-64
- ~**10,635** residents who are children

Additionally, the new reconciliation law will require **13,325** enrollees to file new paperwork to stay covered.

### Counties Hardest Hit:

Highest average loss of premium tax credits:

- Custer County: \$2,112 more per year
- Ziebach County: \$1,812 more per year
- Brookings County: \$1,776 more per year
- Bennett County: \$1,740 more per year
- Pennington County: \$1,692 more per year

Highest number of enrollees that could be affected:

- Minnehaha County: 9,400
- Pennington County: 6,100
- Lincoln County: 3,200
- Codington County: 2,600
- Brown County: 2,200

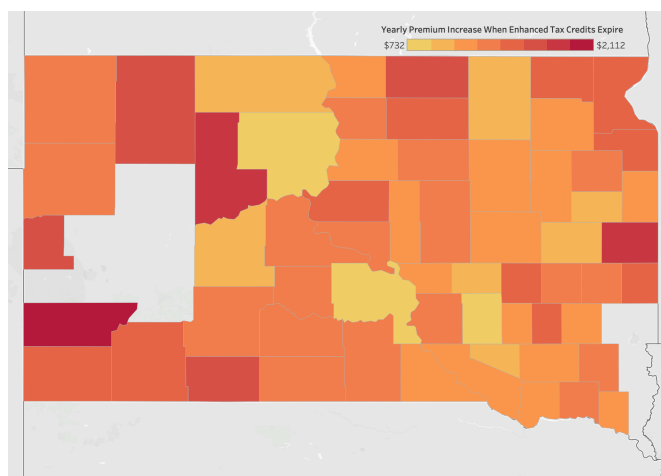
### Rural Counties:

Without Congressional action, eligible enrollees in rural counties will pay on average **\$1,327** more per year for marketplace health coverage—and multiple times more per family.

**31,897** residents in rural counties had health insurance marketplace coverage in 2024, **70** percent more than in 2021. This includes:

- ~**7,961** residents ages 55-64
- ~**6,778** residents who are children

Additionally, the new reconciliation law will require **7,853** enrollees in rural counties to file new paperwork to stay covered.



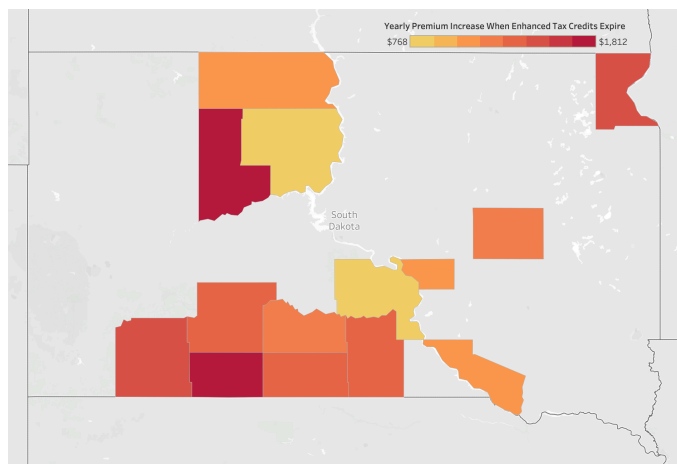
## High Diabetes Rate Counties:

Without Congressional action, eligible enrollees in high diabetes counties will pay on average **\$1,243** more per year for marketplace health coverage—and multiple times more per family.

**4,403** residents in high diabetes counties had health insurance marketplace coverage in 2024, **83** percent more than in 2021. This includes:

- ~**1,074** residents ages 55-64
- ~**840** residents who are children

Additionally, the new reconciliation law will require **1,253** enrollees in high diabetes counties to file new paperwork to stay covered.



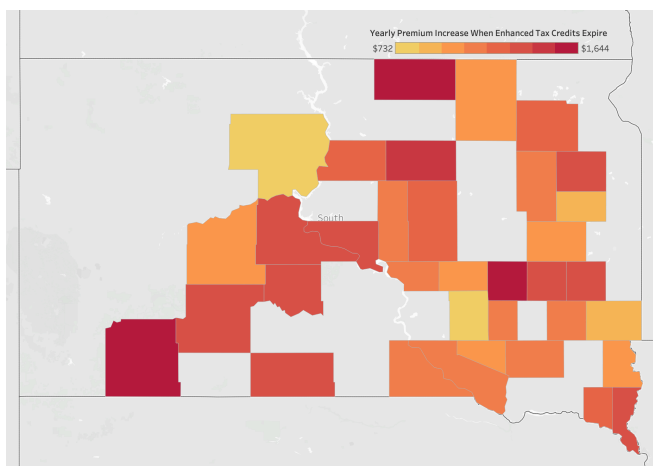
## High Cancer Rate Counties:

Without Congressional action, eligible enrollees in high cancer rate counties will pay on average **\$1,091** more per year for marketplace health coverage—and multiple times more per family.

**29,447** residents in high cancer rate counties had health insurance marketplace coverage in 2024, **71** percent more than in 2021. This includes:

- ~**6,662** residents ages 55-64
- ~**6,147** residents who are children

Additionally, the new reconciliation law will require **7,710** enrollees in high cancer rate counties to file new paperwork to stay covered.



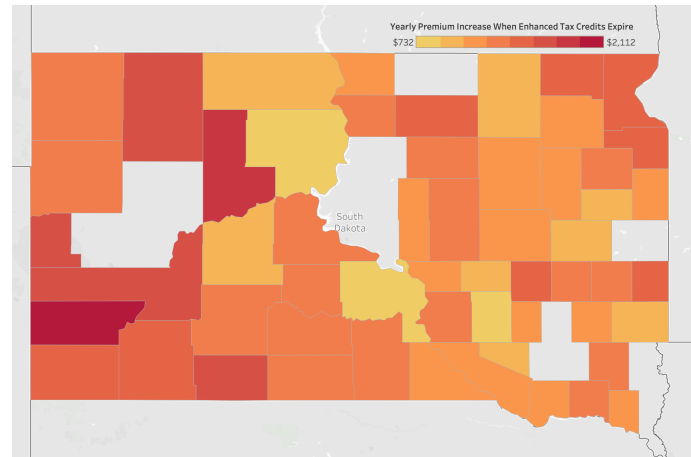
## High Uninsured Rate Counties:

Without Congressional action, eligible enrollees in high uninsured rate counties will pay on average **\$1,281** more per year for marketplace health coverage—and multiple times more per family.

**43,497** residents in high uninsured rate counties had health insurance marketplace coverage in 2024, **71** percent more than in 2021. This includes:

- ~**10,660** residents ages 55-64
- ~**8,542** residents who are children

Additionally, the new reconciliation law will require **10,923** enrollees in high uninsured rate counties to file new paperwork to stay covered.



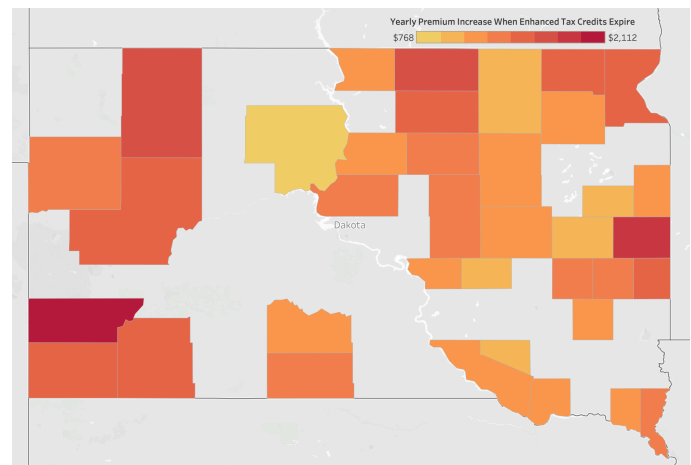
## High Primary Care Ratio Counties:

Without Congressional action, eligible enrollees in high primary care ratio counties will pay on average **\$1,350** more per year for marketplace health coverage—and multiple times more per family.

**19,753** residents in high primary care ratio counties had health insurance marketplace coverage in 2024, **72** percent more than in 2021. This includes:

- ~**5,011** residents ages 55-64
- ~**4,308** residents who are children

Additionally, the new reconciliation law will require **5,078** enrollees in high primary care ratio counties to file new paperwork to stay covered.



## County Characteristics Definitions:

- **Rural:** Counties are classified as rural if they meet the definition of “Fully FORHP Rural Counties” by the Health Resources and Services Administration (HRSA) [Federal Office of Rural Health Policy](#).
- **High Diabetes:** Counties with higher than the national average rates of diabetes.
- **Higher Cancer Prevalence:** Counties with higher than the national average prevalence rate of cancer.
- **High Uninsured:** Counties with a rate of people without health insurance above the national average.
- **High Primary Care Ratio:** Counties whose population to primary care physician ratio is above the national average, meaning fewer primary care providers per capita.